

**Statement of Organization
Recipient Committee**

Type or print in ink

Statement Type Initial
Not yet qualified or

01/06/2011
Date qualified as committee

Amendment
List I.D. number:

Date qualified as committee
(if applicable)

Termination - See Part 5
List I.D. number:

1334417
12/31/2011
Date of Termination

Date Stamp	CITY	CALIFORNIA FORM 410
		For Official Use Only
		12 FEB 16 AM 10:21
		OFFICE OF THE CITY CLERK

1. Committee Information

NAME OF COMMITTEE
CONCERNED NEIGHBORS AGAINST ILLEGAL BILLBOARDS - NO ON MEASURE A (SEE ATTACHMENT A)

STREET ADDRESS (NO P.O. BOX)
7302 SANTA MONICA BLVD.

CITY	STATE	ZIP CODE	AREA CODE/PHONE
WEST HOLLYWOOD, CA		90046	818-260-0669

MAILING ADDRESS (IF DIFFERENT)
1212 S. VICTORY BLVD.
BURBANK, CA 91502

OPTIONAL: FAX / E-MAIL ADDRESS

COUNTY OF DOMICILE	COUNTY WHERE COMMITTEE IS ACTIVE IF DIFFERENT THAN COUNTY OF DOMICILE
LOS ANGELES	

Attach additional information on appropriately labeled continuation sheets.

2. Treasurer and Other Principal Officers

NAME OF TREASURER
KINDE DURKEE

STREET ADDRESS (NO P.O. BOX)
1212 S VICTORY BLVD.

CITY	STATE	ZIP CODE	AREA CODE/PHONE
BURBANK, CA		91502	818-260-0669

NAME OF ASSISTANT TREASURER, IF ANY

STREET ADDRESS (NO P.O. BOX)

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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NAME OF PRINCIPAL OFFICER(S)
JOHN Q. DUONG - PRESIDENT

STREET ADDRESS (NO P.O. BOX)
19320 HARBORGATE WAY

CITY	STATE	ZIP CODE	AREA CODE/PHONE
TORRANCE, CA		90501	310-755-7263

3. Verification

I have used all reasonable diligence in preparing this statement and to the best of my knowledge the information contained herein is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 2-3-2012
DATE

Executed on _____
DATE

Executed on _____
DATE

Executed on _____
DATE

By [Signature]
Counsel to Committee Sponsor
SIGNATURE OF TREASURER OR ASSISTANT TREASURER

By _____
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT

By _____
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT

By _____
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, OR STATE MEASURE PROPONENT

**Statement of Organization
Recipient Committee**

STATEMENT OF ORGANIZATION

CALIFORNIA FORM **410**

2 of 6

INSTRUCTIONS ON REVERSE

COMMITTEE NAME

CONCERNED NEIGHBORS AGAINST ILLEGAL BILLBOARDS - NO ON MEASURE A (SEE ATTACHMENT A)

I.D. NUMBER

1334417

2a. Additional Officers

NAME OF OTHER PRINCIPAL OFFICER(S)

RYAN BROOKS - SECRETARY AND CHIEF FINANCIAL OFFICER

MAILING ADDRESS

1731 WORKMAN STREET

CITY	STATE	ZIP CODE	AREA CODE/PHONE
LOS ANGELES,	CA	90031	323-276-7202

NAME OF OTHER PRINCIPAL OFFICER(S)

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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NAME OF OTHER PRINCIPAL OFFICER(S)

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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MAILING ADDRESS

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**Statement of Organization
Recipient Committee**

STATEMENT OF ORGANIZATION

CALIFORNIA FORM **410**

INSTRUCTIONS ON REVERSE

3 of 6

COMMITTEE NAME
CONCERNED NEIGHBORS AGAINST ILLEGAL BILLBOARDS - NO ON MEASURE A (SEE ATTACHMENT A)

I.D. NUMBER
1334417

4. Type of Committee Complete the applicable sections.

Controlled Committee

- List the name of each controlling officeholder, candidate, or state measure proponent. If candidate or officeholder controlled, also list the elective office sought or held, and district number, if any, and the year of the election.
- List the political party with which each officeholder or candidate is affiliated or check "non-partisan."
- If this committee acts jointly with another controlled committee, list the name and identification number of the other controlled committee.

NAME OF CANDIDATE/OFFICEHOLDER/STATE MEASURE PROPONENT	ELECTIVE OFFICE SOUGHT OR HELD (INCLUDE DISTRICT NUMBER IF APPLICABLE)	YEAR OF ELECTION	PARTY
			<input type="checkbox"/> Non-Partisan
			<input type="checkbox"/> Non-Partisan

- List the financial institution where the campaign bank account is located (controlled "candidate election" committees only)

NAME OF FINANCIAL INSTITUTION	AREA CODE/PHONE	BANK ACCOUNT NUMBER	
ADDRESS	CITY	STATE	ZIP CODE

Primarily Formed Committee Primarily formed to support or oppose specific candidates or measures in a single election. List below:

CANDIDATE(S) NAME OR MEASURE(S) FULL TITLE (INCLUDE BALLOT NO. OR LETTER)	CANDIDATE(S) OFFICE SOUGHT OR HELD OR MEASURE(S) JURISDICTION (INCLUDE DISTRICT NO., CITY OR COUNTY, AS APPLICABLE)	CHECK ONE	
		SUPPORT	OPPOSE
MEASURE A A	WEST HOLLYWOOD		X
		SUPPORT	OPPOSE

**Statement of Organization
Recipient Committee**

STATEMENT OF ORGANIZATION

CALIFORNIA FORM **410**

4 of 6

INSTRUCTIONS ON REVERSE

COMMITTEE NAME
CONCERNED NEIGHBORS AGAINST ILLEGAL BILLBOARDS - NO ON MEASURE A (SEE ATTACHMENT A)

I.D. NUMBER
1334417

4. Type of Committee (Continued)

General Purpose Committee

Not formed to support or oppose specific candidates or measures in a single election. Check only one box:

CITY Committee COUNTY Committee STATE Committee

PROVIDE BRIEF DESCRIPTION OF ACTIVITY

Sponsored Committee

List additional sponsors on an attachment.

NAME OF SPONSOR

CLEAR CHANNEL OUTDOOR - SOUTHERN CALIFORNIA

INDUSTRY GROUP OR AFFILIATION OF SPONSOR

OUTDOOR ADVERTISING

STREET ADDRESS

NO. AND STREET

CITY

STATE

ZIP CODE

19320 HARBORGATE WAY

TORRANCE, CA 90501

Small Contributor Committee

Date qualified

5. Termination Requirements By signing the verification, the treasurer, assistant treasurer and/or candidate, officeholder, or proponent certify that all of the following conditions have been met:

- This committee has ceased to receive contributions and make expenditures;
 - This committee does not anticipate receiving contributions or making expenditures in the future;
 - This committee has eliminated or has no intention or ability to discharge all debts, loans received, and other obligations;
 - This committee has no surplus funds; and
 - This committee has filed all campaign statements required by the Political Reform Act disclosing all reportable transactions.
- There are restrictions on the disposition of surplus campaign funds held by elected officers who are leaving office and by defeated candidates. Refer to Government Code Section 89519.
- Leftover funds of ballot measure committees may be used for political, legislative or governmental purposes under Government Code Sections 89511 - 89518, and are subject to Elections Code Section 18680 and FPPC Regulation 18521.5.

**Statement of Organization
Recipient Committee**

STATEMENT OF ORGANIZATION

CALIFORNIA
FORM **410**

INSTRUCTIONS ON REVERSE

Page 5 of 6

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I.D. NUMBER

1334417

Sponsored Committee List additional sponsors on an attachment.

NAME OF SPONSOR CBS OUTDOOR		INDUSTRY GROUP OR AFFILIATION OF SPONSOR OUTDOOR ADVERTISING		
MAILING ADDRESS 1731 WORKMAN STREET	NO. AND STREET	CITY LOS ANGELES CA, 90031	STATE	ZIP CODE
NAME OF SPONSOR VAN WAGNER OUTDOOR		INDUSTRY GROUP OR AFFILIATION OF SPONSOR OUTDOOR ADVERTISING		
MAILING ADDRESS 11829 VENTURA BLVD.	NO. AND STREET	CITY STUDIO CITY CA, 91604	STATE	ZIP CODE
NAME OF SPONSOR LAMAR ADVERTISING		INDUSTRY GROUP OR AFFILIATION OF SPONSOR OUTDOOR ADVERTISING		
MAILING ADDRESS 5321 CORPORATE BLVD.	NO. AND STREET	CITY BATON ROUGE LA, 70808	STATE	ZIP CODE
NAME OF SPONSOR		INDUSTRY GROUP OR AFFILIATION OF SPONSOR		
MAILING ADDRESS	NO. AND STREET	CITY	STATE	ZIP CODE
NAME OF SPONSOR		INDUSTRY GROUP OR AFFILIATION OF SPONSOR		
MAILING ADDRESS	NO. AND STREET	CITY	STATE	ZIP CODE
NAME OF SPONSOR		INDUSTRY GROUP OR AFFILIATION OF SPONSOR		
MAILING ADDRESS	NO. AND STREET	CITY	STATE	ZIP CODE

**Additional Comments
for Form 410**

STATEMENT OF ORGANIZATION

CALIFORNIA **410**
FORM

6 of 6

INSTRUCTIONS ON REVERSE

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CONCERNED NEIGHBORS AGAINST ILLEGAL BILLBOARDS - NO ON MEASURE A (SEE ATTACHMENT A)

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NOTE: THIS COMMITTEE HAS FILED THESE TERMINATION FILINGS AND ADDITIONALLY SOUGHT APPROVAL FOR TERMINATION WITH THE FAIR POLITICAL PRACTICES COMMISSION IN ACCORDANCE WITH FPPC ADVICE LETTER A-11-198 (R. RIOS) AND IN CONSULTATION WITH FPPC COUNSEL. PLEASE ADDRESS ANY QUESTIONS TO THE COUNSEL FOR COMMITTEE SPONSOR, JASON D. KAUNE AT (415) 389-6800. ATTACHMENT A - COMPLETE COMMITTEE NAME: CONCERNED NEIGHBORS AGAINST ILLEGAL BILLBOARDS: A COALITION OF NEIGHBORHOOD ACTIVISTS, RESIDENTS, BUSINESSES, OUTDOOR ADVERTISERS, HOMEOWNERS ASSOCIATIONS AND SENIORS OPPOSED TO THE PERMITTING AND EXPANSION OF ILLEGAL BILLBOARDS, WITH MAJOR FUNDING BY CLEAR CHANNEL OUTDOOR AND CBS OUTDOOR - NO ON MEASURE A